

AUG 05 2004

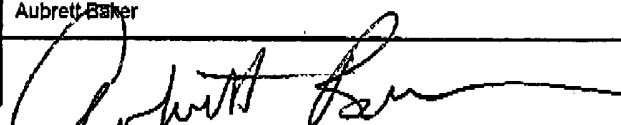
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PTO/SB/21 (04-04)

|   |                      |                        |                 |
|---|----------------------|------------------------|-----------------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number   | 09/724,319             |                 |
|   | Filing Date          | November 27, 2000      |                 |
|   | First Named Inventor | Schenk, Dale B.        |                 |
|   | Art Unit             | 1647                   |                 |
|   | Examiner Name        | Nichols                |                 |
| Total Number of Pages in This Submission  | 30                   | Attorney Docket Number | 15270J-004743US |

| ENCLOSURES (Check all that apply)   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (1 pp., submitted in duplicate)<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Supplemental Information Disclosure Statement (5 pp.)<br>PTO/SB08A (1 pp.)<br>cite no. 543<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                    |
|--|------------------------------------|
| Firm or Individual name                    | Townsend and Townsend and Crew LLP |
| Signature                                  | Rosemarie L. Celli Reg. No. 42,397 |
| Date                                       | August 5, 2004                     |

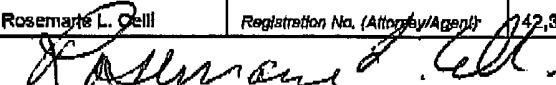
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| Date   | August 5, 2004   |

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PTO/SB/17 (10-03)

|  |  |                          |                        |
|--|--|--------------------------|------------------------|
| <b>FEE TRANSMITTAL<br/>for FY 2004</b>   |  | <i>Complete If Known</i> |                        |
| <small>Effective 10/01/2003. Patent fees are subject to annual revision.</small> |  | Application Number       | 09/724,319             |
|  |  | Filing Date              | November 27, 2000      |
|  |  | First Named Inventor     | Schenk, Dale B.        |
|  |  | Examiner Name            | Christopher J. Nichols |
|  |  | Art Unit                 | 1647                   |
|  |  | Attorney Docket No.      | 15270J-004743US        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  |                          |                        |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 180  |  |                          |                        |

| <b>METHOD OF PAYMENT (check all that apply)</b>  |        |                |        | <b>FEE CALCULATION (continued)</b>  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|--|--------|----------------|--------|---|----------|----------------|--------|-----------------|----------|----------------|--------|-----------------|----------|------------------------|-----|------|-----|-------------------------------------|-----|-----------------------------------|----|------|-----|--|-----|---------------------------------------|-----|------|-----|---------------------------|-----|--|-------|------|-------|--|----|--|------|------|------|--|--|------|--------|------|--------|---|--|------|-----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-------|------|-----|---|--|------|-------|------|-------|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|---|--|------|-----|------|-----|--|-----|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">20-1430</span><br>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Townsend and Townsend and Crew LLP</span>   |        |                |        | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity</th> <th>Small Fee Code</th> <th>Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>85</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>850</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to Institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,380</td><td>2501</td><td>685</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1480</td><td>130</td><td>1480</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Sheet</td><td>180</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> |          |                |        | Large Fee Code  | Entity   | Small Fee Code | Entity | Fee Description | Fee Paid | 1051                   | 130 | 2051 | 85  | Surcharge - late filing fee or oath |     | 1052                              | 50 | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet |     | 1053                                  | 130 | 1053 | 130 | Non-English specification |     | 1812   | 2,520 | 1812 | 2,520 | For filing a request for reexamination |    | 1804   | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |  | 1251 | 110 | 2251 | 55 | Extension for reply within first month |  | 1252 | 420 | 2252 | 210 | Extension for reply within second month |  | 1253 | 850 | 2253 | 475 | Extension for reply within third month |  | 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month |  | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month |  | 1401 | 330 | 2401 | 165 | Notice of Appeal |  | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 145 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to Institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,380 | 2501 | 685 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1480 | 130 | 1480 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Petitions related to provisional applications |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Sheet | 180 | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Fee Code   | Entity | Small Fee Code | Entity |   |          |                |        | Fee Description | Fee Paid |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051   | 130    | 2051           | 85     | Surcharge - late filing fee or oath   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052   | 50     | 2052           | 25     | Surcharge - late provisional filing fee or cover sheet  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053   | 130    | 1053           | 130    | Non-English specification   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812   | 2,520  | 1812           | 2,520  | For filing a request for reexamination  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804   | 920*   | 1804           | 920*   | Requesting publication of SIR prior to Examiner action  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805   | 1,840* | 1805           | 1,840* | Requesting publication of SIR after Examiner action   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251   | 110    | 2251           | 55     | Extension for reply within first month  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252   | 420    | 2252           | 210    | Extension for reply within second month   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253   | 850    | 2253           | 475    | Extension for reply within third month  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254   | 1,480  | 2254           | 740    | Extension for reply within fourth month   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255   | 2,010  | 2255           | 1,005  | Extension for reply within fifth month  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401   | 330    | 2401           | 165    | Notice of Appeal  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402   | 330    | 2402           | 165    | Filing a brief in support of an appeal  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403   | 280    | 2403           | 145    | Request for oral hearing  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451   | 1,510  | 1451           | 1,510  | Petition to Institute a public use proceeding   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452   | 110    | 2452           | 55     | Petition to revive - unavoidable  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453   | 1,330  | 2453           | 665    | Petition to revive - unintentional  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501   | 1,380  | 2501           | 685    | Utility issue fee (or reissue)  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502   | 480    | 2502           | 240    | Design issue fee  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503   | 640    | 2503           | 320    | Plant issue fee   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1480   | 130    | 1480           | 130    | Petitions to the Commissioner   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807   | 50     | 1807           | 50     | Petitions related to provisional applications   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806   | 180    | 1806           | 180    | Submission of Information Disclosure Sheet  | 180      |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021   | 40     | 8021           | 40     | Recording each patent assignment per property (times number of properties)  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809   | 770    | 2809           | 385    | Filing a submission after final rejection (37 CFR § 1.129(a))   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810   | 770    | 2810           | 385    | For each additional invention to be examined (37 CFR § 1.129(b))  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801   | 770    | 2801           | 385    | Request for Continued Examination (RCE)   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802   | 900    | 1802           | 900    | Request for expedited examination of a design application   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity</th> <th>Small Fee Code</th> <th>Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table>   |        |                |        | Large Fee Code  | Entity   | Small Fee Code | Entity | Fee Description | Fee Paid | 1001           | 770    | 2001            | 385      | Utility filing fee     |     | 1002 | 340 | 2002                                | 170 | Design filing fee                 |    | 1003 | 530 | 2003   | 265 | Plant filing fee                      |     | 1004 | 770 | 2004                      | 385 | Reissue filing fee                                 |       | 1005 | 160   | 2005                                   | 80 | Provisional filing fee                                     |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Fee Code   | Entity | Small Fee Code | Entity | Fee Description   | Fee Paid |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001   | 770    | 2001           | 385    | Utility filing fee  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002   | 340    | 2002           | 170    | Design filing fee   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003   | 530    | 2003           | 265    | Plant filing fee  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004   | 770    | 2004           | 385    | Reissue filing fee  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005   | 160    | 2005           | 80     | Provisional filing fee  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity</th> <th>Small Fee Code</th> <th>Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>85</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1208</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>88</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> |        |                |        | Large Fee Code  | Entity   | Small Fee Code | Entity | Fee Description | Fee Paid | 1202           | 18     | 2202            | 9        | Claims in excess of 20 |     | 1201 | 85  | 2201                                | 43  | Independent claims in excess of 3 |    | 1208 | 290 | 2203   | 145 | Multiple dependent claim, if not paid |     | 1204 | 88  | 2204                      | 43  | ** Reissue independent claims over original patent |       | 1205 | 18    | 2205                                   | 9  | ** Reissue claims in excess of 20 and over original patent |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Fee Code   | Entity | Small Fee Code | Entity | Fee Description   | Fee Paid |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202   | 18     | 2202           | 9      | Claims in excess of 20  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201   | 85     | 2201           | 43     | Independent claims in excess of 3   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1208   | 290    | 2203           | 145    | Multiple dependent claim, if not paid   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204   | 88     | 2204           | 43     | ** Reissue independent claims over original patent  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205   | 18     | 2205           | 9      | ** Reissue claims in excess of 20 and over original patent  |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>3. SUBTOTAL (1)</b> (\$)  |        |                |        |   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>3. SUBTOTAL (2)</b> (\$)  |        |                |        |   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>3. SUBTOTAL (3)</b> (\$)  |        |                |        |   |          |                |        |                 |          |                |        |                 |          |                        |     |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |  |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

|                     |   |                                   |                |
|---------------------|---|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |   | <i>Complete If Applicable</i>     |                |
| Name (Print/Type)   | Rosemarie L. O'Neil   | Registration No. (Attorney/Agent) | 142,397        |
| Signature           |  | Telephone                         | 650-326-2400   |
|                     |   | Date                              | August 5, 2004 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2538.

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PTO/SB/17 (10-03)

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|--|--|--------------------------|------------------------|
| <b>FEE TRANSMITTAL</b><br><b>for FY 2004</b><br><i>Effective 10/01/2003, Patent fees are subject to annual revision.</i> |  | <b>Complete If Known</b> |                        |
|  |  | Application Number       | 09/724,919             |
|  |  | Filing Date              | November 27, 2000      |
|  |  | First Named Inventor     | Schenk, Dale B.        |
|  |  | Examiner Name            | Christopher J. Nichols |
|  |  | Art Unit                 | 1647                   |
|  |  | Attorney Docket No.      | 15270J-004743US        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  |                          |                        |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 180  |  |                          |                        |

| <b>METHOD OF PAYMENT (check all that apply)</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: 20-1430<br>Deposit Account Name: Townsend and Townsend and Crew LLP<br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  |               |  |          | <b>FEE CALCULATION (continued)</b><br><b>3. ADDITIONAL FEES</b>            |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
|--|---------------|--|----------|--|-----------------------------|-----------------|----------|--------------------|---------------|--|--|--------------------|----------|--------------------|--|--------------|--------------|-------------------|----------|---------------|---------------|------------------|--|----------|----------|------------------------|--|----------|---------|-----------------------------------|--|---------------------|----------|---------------------------------------|------|--|---------|--|--|---------|--------|--|--------|---------------------|----------|----------|----------|----------|----------|--|--|------|-----|------|----|-------------------------------------|--|------|----|------|----|--|--|------|-----|------|-----|---------------------------|--|------|-------|------|-------|--|--|------|------|------|------|--|--|------|--------|------|--------|---|--|------|-----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-------|------|-----|---|--|------|-------|------|-------|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|---|--|------|-----|------|-----|---|-----|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|-----------------------------------|--|--|--|--|-----------------------------|
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td></td> <td></td> </tr> <tr> <td>1001 770</td> <td>2001 385</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002 340</td> <td>2002 170</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003 530</td> <td>2003 265</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004 770</td> <td>2004 385</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005 180</td> <td>2005 80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3"><b>SUBTOTAL (1)</b></td> <td>(\$)</td> </tr> </tbody> </table>  |               |  |          | Large Entity   | Small Entity                | Fee Description | Fee Paid | Fee Code (\$)      | Fee Code (\$) |  |  | 1001 770           | 2001 385 | Utility filing fee |  | 1002 340     | 2002 170     | Design filing fee |          | 1003 530      | 2003 265      | Plant filing fee |  | 1004 770 | 2004 385 | Reissue filing fee     |  | 1005 180 | 2005 80 | Provisional filing fee            |  | <b>SUBTOTAL (1)</b> |          |                                       | (\$) | <table border="1"> <thead> <tr> <th>Large</th> <th>Entity</th> <th>Small</th> <th>Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code</td> <td>Fee (\$)</td> <td>Fee Code</td> <td>Fee (\$)</td> <td></td> <td></td> </tr> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of AIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of AIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>420</td> <td>2252</td> <td>210</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>950</td> <td>2253</td> <td>475</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,480</td> <td>2254</td> <td>740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>2,010</td> <td>2255</td> <td>1,005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>330</td> <td>2401</td> <td>165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>330</td> <td>2402</td> <td>165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>290</td> <td>2403</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,310</td> <td>1451</td> <td>1,310</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>1453</td> <td>1,330</td> <td>2453</td> <td>665</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>1,390</td> <td>2501</td> <td>695</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502</td> <td>480</td> <td>2502</td> <td>240</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503</td> <td>640</td> <td>2503</td> <td>320</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> <td>Submission of Information Disclosure Stmt</td> <td>180</td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>1809</td> <td>770</td> <td>2809</td> <td>385</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>770</td> <td>2810</td> <td>385</td> <td>For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td>1801</td> <td>770</td> <td>2801</td> <td>385</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="6">Other fee (specify) _____</td> </tr> <tr> <td colspan="5">*Reduced by Basic Filing Fee Paid</td> <td><b>SUBTOTAL (3)</b> (\$180)</td> </tr> </tbody> </table> |         |  |  | Large   | Entity | Small  | Entity | Fee Description     | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) |  |  | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath |  | 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet |  | 1053 | 130 | 1053 | 130 | Non-English specification |  | 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination |  | 1804 | 920* | 1804 | 920* | Requesting publication of AIR prior to Examiner action |  | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of AIR after Examiner action |  | 1251 | 110 | 2251 | 55 | Extension for reply within first month |  | 1252 | 420 | 2252 | 210 | Extension for reply within second month |  | 1253 | 950 | 2253 | 475 | Extension for reply within third month |  | 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month |  | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month |  | 1401 | 330 | 2401 | 165 | Notice of Appeal |  | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145 | Request for oral hearing |  | 1451 | 1,310 | 1451 | 1,310 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,390 | 2501 | 695 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Petitions related to provisional applications |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | 180 | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  |  | <b>SUBTOTAL (3)</b> (\$180) |
| Large Entity   | Small Entity  | Fee Description  | Fee Paid |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Fee Code (\$)  | Fee Code (\$) |  |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1001 770   | 2001 385      | Utility filing fee   |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1002 340   | 2002 170      | Design filing fee  |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1003 530   | 2003 265      | Plant filing fee   |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1004 770   | 2004 385      | Reissue filing fee   |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1005 180   | 2005 80       | Provisional filing fee                                     |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| <b>SUBTOTAL (1)</b>  |               |  | (\$)     |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Large  | Entity        | Small  | Entity   | Fee Description  | Fee Paid                    |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Fee Code   | Fee (\$)      | Fee Code   | Fee (\$) |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1051   | 130           | 2051   | 65       | Surcharge - late filing fee or oath  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1052   | 50            | 2052   | 25       | Surcharge - late provisional filing fee or cover sheet                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1053   | 130           | 1053   | 130      | Non-English specification  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1812   | 2,520         | 1812   | 2,520    | For filing a request for reexamination                                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1804   | 920*          | 1804   | 920*     | Requesting publication of AIR prior to Examiner action                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1805   | 1,840*        | 1805   | 1,840*   | Requesting publication of AIR after Examiner action                        |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1251   | 110           | 2251   | 55       | Extension for reply within first month                                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1252   | 420           | 2252   | 210      | Extension for reply within second month                                    |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1253   | 950           | 2253   | 475      | Extension for reply within third month                                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1254   | 1,480         | 2254   | 740      | Extension for reply within fourth month                                    |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1255   | 2,010         | 2255   | 1,005    | Extension for reply within fifth month                                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1401   | 330           | 2401   | 165      | Notice of Appeal   |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1402   | 330           | 2402   | 165      | Filing a brief in support of an appeal                                     |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1403   | 290           | 2403   | 145      | Request for oral hearing   |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1451   | 1,310         | 1451   | 1,310    | Petition to institute a public use proceeding                              |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1452   | 110           | 2452   | 55       | Petition to revive - unavoidable   |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1453   | 1,330         | 2453   | 665      | Petition to revive - unintentional   |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1501   | 1,390         | 2501   | 695      | Utility issue fee (or reissue)   |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1502   | 480           | 2502   | 240      | Design issue fee   |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1503   | 640           | 2503   | 320      | Plant issue fee  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1460   | 130           | 1460   | 130      | Petitions to the Commissioner  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1807   | 50            | 1807   | 50       | Petitions related to provisional applications                              |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1806   | 180           | 1806   | 180      | Submission of Information Disclosure Stmt                                  | 180                         |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 8021   | 40            | 8021   | 40       | Recording each patent assignment per property (times number of properties) |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1809   | 770           | 2809   | 385      | Filing a submission after final rejection (37 CFR § 1.129(a))              |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1810   | 770           | 2810   | 385      | For each additional invention to be examined (37 CFR § 1.129(b))           |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1801   | 770           | 2801   | 385      | Request for Continued Examination (RCE)                                    |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1802   | 900           | 1802   | 900      | Request for expedited examination of a design application                  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Other fee (specify) _____  |               |  |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| *Reduced by Basic Filing Fee Paid  |               |  |          |  | <b>SUBTOTAL (3)</b> (\$180) |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td></td> <td></td> </tr> <tr> <td>1202 18</td> <td>2202 9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201 66</td> <td>2201 43</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 280</td> <td>2203 145</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 66</td> <td>2204 43</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 18</td> <td>2205 9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="3"><b>SUBTOTAL (2)</b></td> <td>(\$)</td> </tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see above</p> |               |  |          | Total Claims   | Extra Claims                | Fee from below  | Fee Paid | Independent Claims |               |  |  | Multiple Dependent |          |                    |  | Large Entity | Small Entity | Fee Description   | Fee Paid | Fee Code (\$) | Fee Code (\$) |                  |  | 1202 18  | 2202 9   | Claims in excess of 20 |  | 1201 66  | 2201 43 | Independent claims in excess of 3 |  | 1203 280            | 2203 145 | Multiple dependent claim, if not paid |      | 1204 66  | 2204 43 | ** Reissue independent claims over original patent |  | 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent |        | <b>SUBTOTAL (2)</b> |          |          | (\$)     |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Total Claims   | Extra Claims  | Fee from below   | Fee Paid |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Independent Claims   |               |  |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Multiple Dependent   |               |  |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Large Entity   | Small Entity  | Fee Description  | Fee Paid |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| Fee Code (\$)  | Fee Code (\$) |  |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1202 18  | 2202 9        | Claims in excess of 20                                     |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1201 66  | 2201 43       | Independent claims in excess of 3                          |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1203 280   | 2203 145      | Multiple dependent claim, if not paid                      |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1204 66  | 2204 43       | ** Reissue independent claims over original patent         |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| 1205 18  | 2205 9        | ** Reissue claims in excess of 20 and over original patent |          |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |
| <b>SUBTOTAL (2)</b>  |               |  | (\$)     |  |                             |                 |          |                    |               |  |  |                    |          |                    |  |              |              |                   |          |               |               |                  |  |          |          |                        |  |          |         |                                   |  |                     |          |                                       |      |  |         |  |  |         |        |  |        |                     |          |          |          |          |          |  |  |      |     |      |    |                                     |  |      |    |      |    |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |     |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                             |

|                     |                           |                                   |                |
|---------------------|---------------------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                           | <b>Complete (if applicable)</b>   |                |
| Name (Print/Type)   | Rosemarie L. Celli        | Registration No. (Attorney/Agent) | 42,397         |
| Signature           | <i>Rosemarie L. Celli</i> | Telephone                         | 650-326-2400   |
|                     |                           | Date                              | August 5, 2004 |

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**PATENT**  
Attorney Docket No.: 15270J-004743US  
Client Reference No.: 209-US-CIP5C3

Commissioner for Patents  
P.O. Box 1450  
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AUG 05 2004

On August 5, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: 

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No: 09/724,319  
Applicant: Dale B. Schenk  
Filed: November 27, 2000  
TC/A.U. 1647  
Examiner: Christopher J. Nichols

Docket No: 15270J-004743US  
Customer No: 20350

**SUPPLEMENTAL INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 AND §1.98**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on the attached PTO/SB/08A form is being called to the attention of the Examiner. Copy of reference number 543 is enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this

Dale B. Schenk  
Application No.: 09/724,319  
Page 2

PATENT

application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Applicant also cites commonly owned copending applications directed to related subject matter:

09/201,430 filed 11/30/98 issue fee paid on 10/07/03;  
09/497,553 filed 02/03/00;  
09/724,477 filed 11/28/00 issue fee paid on 10/07/03;  
09/723,927 filed 11/28/00 issue fee paid on 10/07/03;  
09/723,762 filed 11/28/00 issue fee paid on 10/07/03;  
09/724,102 filed 11/28/00 issue fee paid on 10/07/03;  
09/724,489 filed 11/28/00 issue fee paid on 10/07/03;  
10/816,022 filed 03/31/04;  
10/816,529 filed 03/31/04;  
10/815,391 filed 03/31/04;  
10/815,353 filed 03/31/04;  
15270J-004736US filed 03/31/04;  
10/815,404 filed 03/31/04;  
09/322,289 filed 05/28/99;  
09/723,713 filed 11/27/00;  
09/723,760 filed 11/27/00;  
09/724,319 filed 11/27/00;  
09/723,384 filed 11/27/00 issued as U.S. 6,710,226 on 03/23/04;  
09/724,495 filed 11/27/00;  
10/788,666 filed 02/27/04;  
10/429,216 filed 05/30/03;  
09/580,015 filed 05/26/00;  
09/724,940 filed 11/28/00;  
09/724,961 filed 11/28/00 issue fee paid on 02/26/04;  
09/580,018 filed 05/26/00 issue fee paid on 02/26/04;

Dale B. Schenk  
Application No.: 09/724,319  
Page 3

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09/724,552 filed 11/28/00 issue fee paid on 02/26/04;  
09/723,544 filed 11/28/00;  
09/724,273 filed 11/28/00;  
09/724,551 filed 11/28/00; issue fee paid on 02/26/04;  
09/724,288 filed 11/28/00;  
10/777,792 filed 02/11/04;  
15270J-004767US filed 04/12/04;  
09/580,019 filed 05/26/00;  
09/723,765 filed 11/28/00;  
09/724,291 filed 11/28/00;  
09/724,929 filed 11/28/00;  
09/585,817 filed 06/01/00;  
09/724,567 filed 11/28/00 notice of allowance mailed 03/02/04;  
09/724,575 filed 11/28/00;  
09/724,953 filed 11/28/00 notice of allowance mailed 03/11/04;  
09/724,570 filed 11/28/00;  
09/585,656 filed 06/01/00;  
09/723,766 filed 11/27/00;  
09/723,725 filed 11/27/00;  
09/579,690 filed 05/26/00;  
09/979,701 filed 03/13/01 (U.S. Nat'l Stage of PCT/US00/14810 filed 05/26/00);  
09/979,952 filed 04/04/02 (U.S. Nat'l Stage of PCT/US00/15239 filed 06/01/00);

and,

09/980,568 filed 03/12/02 (U.S. Nat'l Stage of PCT/US00/15302 filed 06/01/00).

Applicant also cites the following copending applications directed to related subject matter but subject to different assignment:

10/010,942 filed 12/06/01;  
10/789,273 filed 2/27/04;  
10/232,030 filed 08/30/02;  
10/388,389 filed 03/12/03

Dale B. Schenk  
Application No.: 09/724,319  
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10/703,713 filed November 7, 2003  
10/704,070 filed November 7, 2003  
10/388,214 filed 03/12/03;  
60/474,654 filed 05/30/03;  
60/530,481 filed 12/17/03; and,  
10/771,174 filed 02/04/04.

Applicant further cites the following commonly owned abandoned applications directed to related subject matter:

60/067,740 filed 12/02/97;  
60/080,970 filed 04/07/98;  
60/067,219 filed 12/03/97;  
60/079,697 filed 03/27/98;  
09/204,838 filed 12/03/98;  
09/724,921 filed 11/28/00;  
60/137,010 filed 06/01/99;  
60/251,892 filed 12/6/00;  
60/137,047 filed 06/01/99; and,  
60/136,655 filed 05/28/99.

Applicant also cites the following abandoned application directed to related subject matter but subject to different assignment:

60/251,892 filed 12/06/00;  
60/444,150 filed 02/01/03; and,  
60/363,751 filed 03/12/02.

Applicant points out that the following applications are now commonly assigned but were previously subject to different assignment than the present application:

60/067,219 filed 12/03/97;  
60/079,697 filed 03/27/98;  
09/204,838 filed 12/03/98;  
09/724,921 filed 11/28/00; and,

Dale B. Schenk  
Application No.: 09/724,319  
Page 5

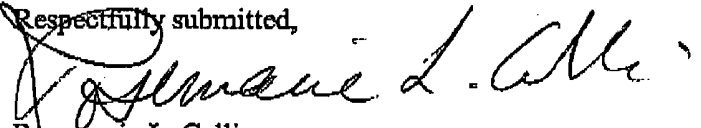
PATENT

09/724,929 filed 11/28/00.

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

Applicant believes a fee of \$180 is required for submission of this statement, since it is being submitted after the first Office Action on the merits but before a final action. The Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Rosemarie L. Celli  
Reg. No. 42,397

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Fax: 650-326-2422  
RLC

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PTO/SB/06A (06-03)

Substitute for form 1448A/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet 1 of 1

**Complete if Known**

|                        |                   |
|------------------------|-------------------|
| Application Number     | 09/724,319        |
| Filing Date            | November 27, 2000 |
| First Named Inventor   | Schenk, Dale B.   |
| Art Unit               | 1847              |
| Examiner Name          | Nichols           |
| Attorney Docket Number | 15270J-004743US   |

**U.S. PATENT DOCUMENTS**

| Examiner | Cite No. <sup>1</sup> | Document Number<br>Number Kind Code <sup>2</sup> (When) | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines, Where<br>Relevant Passages or Relevant<br>Figures Appear |
|----------|-----------------------|---|--------------------------------|--|---|
|          | 543                   | US-5,278,049 A  | 01/11/1994                     | Baker et al.                                       |   |

**FOREIGN PATENT DOCUMENTS**

| Examiner<br>Initials* | Cite<br>No. <sup>1</sup> | Foreign Patent Document   |                     |                                   | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited<br>Document | Pages, Columns, Lines,<br>Where Relevant<br>Passages or Relevant<br>Figures Appear | T <sup>2</sup>           |
|-----------------------|--------------------------|---------------------------|---------------------|-----------------------------------|--------------------------------|---|--|--------------------------|
|                       |                          | Country Code <sup>3</sup> | Number <sup>4</sup> | Kind Code <sup>5</sup> (If known) |                                |   |  |                          |
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|                       |                          |                           |                     |                                   |                                |   |  | <input type="checkbox"/> |

Examiner  
SignatureDate  
Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kind Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 001.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

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